

**FEC FORM 3L****REPORT OF CONTRIBUTIONS BUNDLED BY LOBBYISTS/REGISTRANTS  
AND LOBBYIST/REGISTRANT PACs**

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. **12FE4M5**  
**ROMNEY FOR PRESIDENT, INC.**

ADDRESS (number and street) **585 COMMERCIAL ST.**  
☐ Check if different than previously reported. (ACC) **BOSTON** **MA** **02109**  
CITY STATE ZIP CODE

2. **FEC IDENTIFICATION NUMBER** **C** **C00431171**  
3. IS THIS REPORT ☒ **NEW (N)** OR ☐ **AMENDED (A)**  
4. STATE DISTRICT  
For Candidates Only

5. **TYPE OF REPORT**  
(Choose One)  
(a) Quarterly Reports:  
☐ April 15 Quarterly Report (Q1)  
☐ July 15 Quarterly Report (Q2) and/or Semi-annual Report  
☐ October 15 Quarterly Report (Q3)  
☐ January 31 Year-End Report (YE) and/or Semi-annual Report  
☐ July 31 Mid-Year Report (Non-election Year - PAC/Party) (MY) and/or Semi-annual Report  
(b) Monthly Report Due On:  
☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11) (Non-Election Year Only)  
☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12) (Non-Election Year Only)  
☐ Apr 20 (M4) ☒ Jul 20 (M7) and/or Semi-annual Report ☐ Oct 20 (M10) ☐ Jan 31 (YE) and/or Semi-annual Report  
(c) 12-Day **PRE**-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)  
☐ Special (12S) ☐ Convention (12C)  
Election on  /  /  in the State of   
This report also covers the semi-annual period ☐ See Line 6(b)  
(d) 30-Day **POST**-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)  
Election on  /  /  in the State of   
This report also covers the semi-annual period ☐ See Line 6(b)

6. Covered Period(s)  
(a) Quarterly/Monthly/Pre-/Post-Election Covered Period  
This report covers  /  /  through  /  /  and/or ☒ January 1 - June 30  
☐ July 1 - December 31  
(b) Semi-annual Covered Period

7. Total Reportable Bundled Contributions by Lobbyists/Registrants or Lobbyist/Registrant PACs  
(a) Quarterly/Monthly/Pre-/Post-Election Covered Period  0.00  
(b) Semi-annual Covered Period  1092396.69

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer **Darrell Crate**

Signature of Treasurer **Darrell Crate** [Electronically Filed] Date  /  /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only

**FEC FORM 3L**  
02/2009